



Instructions & Example: Read this first

- 1 Begin your Log wherever you are at 3 a.m. on your Travel Day. Record every PLACE you go, even quick stops on the way to work/school, or after you get home, including walking the dog, biking, or jogging.
- 2 PLACE NAME and as COMPLETE ADDRESS information as possible.
- 3 EXACT TIME you ARRIVE at each place.
- 4 Record the code from the **LIST 1 CODES** (located on the flap in Log) for "HOW did you GET there?"
- 5 Total NUMBER of other people in your travel party and the number of those that are members of your household. (DO NOT INCLUDE YOURSELF)
- 6 If you traveled in a VEHICLE owned by your HOUSEHOLD, tell us the Make and Model.
- 7 Did you get out of your vehicle at this place?
- 8 If you rode Transit, record which route number or line you used.
- 9 If you rode Transit, could you have used a personal vehicle instead?
- 10 Record ALL the codes that apply from the **LIST 2 CODES** (located on the flap in Log) for "WHAT did you DO there?"
- 11 EXACT TIME you LEAVE each place.

PLACE 4	PLACE 3	PLACE 2	PLACE 1
What is the NAME OF THE PLACE and WHERE is it located? Your location at 3:00 a.m.: <input checked="" type="checkbox"/> My Home <input type="checkbox"/> My Work <input type="checkbox"/> My School Place Name/Train Station Name: _____ Street Address/Nearest Cross Streets: _____ City, State, and Zip: _____	What is the NAME OF THE PLACE and WHERE is it located? Next PLACE: <input type="checkbox"/> My Home <input type="checkbox"/> My Work <input type="checkbox"/> My School Place Name/Train Station Name: _____ Street Address/Nearest Cross Streets: _____ City, State & Zip: _____	What is the NAME OF THE PLACE and WHERE is it located? Next PLACE: <input type="checkbox"/> My Home <input type="checkbox"/> My Work <input type="checkbox"/> My School Place Name/Train Station Name: _____ Street Address/Nearest Cross Streets: _____ City, State & Zip: _____	What is the NAME OF THE PLACE and WHERE is it located? Next PLACE: <input type="checkbox"/> My Home <input type="checkbox"/> My Work <input type="checkbox"/> My School Place Name/Train Station Name: _____ Street Address/Nearest Cross Streets: _____ City, State & Zip: _____
What TIME did you ARRIVE? Record exact time 8 : 03 am/pm	What TIME did you ARRIVE? Record exact time 7 : 26 am/pm	What TIME did you ARRIVE? Record exact time 7 : 16 am/pm	What TIME did you ARRIVE? Record exact time 7 : 11 am/pm
HOW did you GET there? Use the LIST 1 CODES 3	HOW did you GET there? Use the LIST 1 CODES 3	HOW did you GET there? Use the LIST 1 CODES 3	HOW did you GET there? Use the LIST 1 CODES 3
NUMBER of people traveling with you? Don't include yourself Total #: 0 # of Household members w/ you: 0	NUMBER of people traveling with you? Don't include yourself Total #: 1 # of Household members w/ you: 1	NUMBER of people traveling with you? Don't include yourself Total #: 1 # of Household members w/ you: 1	NUMBER of people traveling with you? Don't include yourself Total #: 1 # of Household members w/ you: 1
IF BY AUTO/TRUCK/VAN: Which household VEHICLE? _____ Did you GET OUT of your vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IF BY AUTO/TRUCK/VAN: Which household VEHICLE? _____ Did you GET OUT of your vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IF BY AUTO/TRUCK/VAN: Which household VEHICLE? _____ Did you GET OUT of your vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	IF BY AUTO/TRUCK/VAN: Which household VEHICLE? _____ Did you GET OUT of your vehicle? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
IF BY TRANSIT: Which ROUTE # or LINE? _____ Was a PERSONAL VEHICLE AVAILABLE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IF BY TRANSIT: Which ROUTE # or LINE? _____ Was a PERSONAL VEHICLE AVAILABLE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IF BY TRANSIT: Which ROUTE # or LINE? _____ Was a PERSONAL VEHICLE AVAILABLE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	IF BY TRANSIT: Which ROUTE # or LINE? _____ Was a PERSONAL VEHICLE AVAILABLE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
WHAT did you DO there? Use the LIST 2 CODES List ALL codes that apply 4	WHAT did you DO there? Use the LIST 2 CODES List ALL codes that apply 10	WHAT did you DO there? Use the LIST 2 CODES List ALL codes that apply 14	WHAT did you DO there? Use the LIST 2 CODES List ALL codes that apply 3
What TIME did you LEAVE? Record exact time 12 : 01 am/pm	What TIME did you LEAVE? Record exact time 7 : 34 am/pm	What TIME did you LEAVE? Record exact time 7 : 21 am/pm	What TIME did you LEAVE? Record exact time 7 : 11 am/pm

Person would continue to record Places 5-10

For assistance, call NuStats toll free at 877-261-4621

Photo example on back!